



SMALL COURSE APPROVAL REQUEST

109 Governor Street, Suite UB-55
Richmond, Virginia 23219
1-800-523-6019 (VA only)
804-864-7600
FAX: 804-864-7580

COURSE #: _____ (REQUIRED IF FORM NOT SUBMITTED AT SAME TIME AS COURSE APPROVAL REQUEST)

TYPE OF PROGRAM: (CHECK ONE APPROPRIATE BOX)

- | | |
|--|--|
| <input type="checkbox"/> First Responder Basic | <input type="checkbox"/> EMT – Basic |
| <input type="checkbox"/> First Responder Refresher | <input type="checkbox"/> EMT – Refresher |
| <input type="checkbox"/> First Responder Required Topics | <input type="checkbox"/> EMT – Required Topics |

COURSE COORDINATOR INFORMATION – PRINT

NAME: _____ CERT #: _____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

PHONE #: HOME: () - - BUSINESS () - - OTHER () - -

PROGRAM LOCATION – PRINT

Facility: _____

PROGRAM INFORMATION -

CURRENT NUMBER OF STUDENTS: _____ PROGRAM LENGTH: _____ (HOURS)

BEGIN DATE: _____ - - - END DATE: _____ - - -

JUSTIFICATION FOR SPECIAL APPROVAL OF SMALL ENROLLMENT: _____

COURSE COORDINATOR: _____ DATE: _____ - - -

NOTE - THIS ORIGINAL FORM MUST BE SUBMITTED FOR ALL REIMBURSEMENT REQUESTED COURSES WITH ENROLLMENT OF LESS THAN 13 STUDENTS AT THE TIME OF THE THIRD LESSON OF THE COURSE. APPROVAL OF CONTINUED FUNDING OF THIS COURSE MUST BE OBTAINED PRIOR TO THE END DATE OF THIS COURSE FOR PAYMENT TO BE PROCESSED.

This form DOES NOT replace the standard Course Approval request form required for initial authorization for program instruction.

This form may be submitted by Mail or Fax - (804) 864-7580

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